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APPLICANTS  
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\*\* CONTINUING DATA \*\*\*\*\* *CSB*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *CSB*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>CSB</i> Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY FINLAND	SHEETS DRAWING 2	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 3
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 909  
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TITLE  
 Personal firewall with location detection

FILING FEE  RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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